## **Statement of Organization - Legal Expense Fund**Use this form to create a new or update an existing Legal Expense Fund.

Amendment	
☐ Yes	□ No

This form must be accompanied by form CRO-3500.

1. Fund Informati	on						
a. Full Name				c. ID Number			
b. Mailing Address (include City, State and Zip Code)				d. Date Organized			
					e. Phone Number		
f. Purpose							
	7.0						
2. Affiliated Entity Information							
a. Candidate Name		b. Candidate's Political Committee Name					
OPP C LOTT II			2011-4.1 E.44-				
c. Office Sought/Held		u. Any Other Ai	ffiliated Entity				
e. Mailing Address (in	clude, City, State, and Zip Co	de)					
3. Treasurer Info	rmation		4. Custodian of Books Information				
a. Full Name			a. Full Name				
b. Mailing Address (include City, State, and Zip Code)		le)	b. Mailing Address (include City, State, and Zip Code)				
c. Phone Number d. Email Address			c. Phone Number	one Number d. Email Address			
		•					
5. Assistant Treas	urer Information	Add	6. Account Inform	nation (inc	l. CRO-3500)	i	
a. Full Name		Remove	a. Financial Institution Full Name Remove				
b. Mailing Address (include City, State, and Zip Code)		b. Purpose					
	I			T			
c. Phone Number	d. Email Address		c. Account Code	d. Type			
CEDTIFICATIO	NT .						
CERTIFICATIO	N						
I certify that the	Committee is in complian	ce with all prov	risions of Article 22M	I, including the	hat no funds are com	nmingled	
with candidate co	ommittee funds or other ne	on-disclosed fu	nds. I further say that	this report is	s complete, true and	correct.	
Di	ted Name of Signer		ignature of Appointed Tre	ocurar	Doto		
riiii	ou raine of signer	3	ignature of Appointed Tre	asulti	Date		